S. No.	Information of Teacher						
1.	Name of the Teacher	Dr. Akshay Kumar					
2.	Teacher's code	AYST02582					
3.	Date of Birth (dd /mm/yyyy)	19/08/1995					
4.	UG Qualification	Name of Degree	BAMS				
		Passing Year	2018 CURLI CORIND SINGLI INDRA DRA CTHA LINIVERSITY DELLII				
		University	GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY DELHI				
5.	PG Qualification	Name of Subject	M.S. SHALYA TANTRA				
		Passing Year	2024				
		University	DATTA MEGHE INSTITUTE OF MEDICAL SCIENCES				
6.	Additional	Subject	NA				
	qualification	Passing Year	NA				
	P.G.Diploma /Ph.D.	University					
7.	Post wise details of Experience in chronological order	Dura		Department (Subject)	Designation	Name of the college	
		From date (dd/mm/yyyy)	To date (dd/mm/yyyy)				
	from the date of initial appointment	04/12/2024	TILL DATE	SHALYA TANTRA	ASSISTANT PROFESSOR	JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE, ALIGARH.	
8.	Presently working Department (Subject)	SHALYA TANTRA					
9.	Present Designation	ASSISTANT PROFESSOR					
10.	Nature of present appointment (regular/contract/de putation)	REGULAR					
11.	Permanent Residential Address	M N 23 C BLOCK, NEW HEERA PARK, NAJAFGARH, SOUTH WEST DELHI, PIN-110043					
12.	Local Residential Address	STAFF QUARTERJEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE AND HOSPITAL ,10 TH KM MILE STONE, LODHA, ALIGARH,202140					
13.	State Board / Council Registration details	Registration Number DBCP/A/9028					
		Name of State Board DELHI BHARTIYA CHIKITSA PARISHAD					